



PART B - FEE(S) TRANSMITTAL

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23-111 7590 10/20/2005

CANTOR COLBURN, LLP
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 BLOOMFIELD, CT 06002

01/18/2006 TBESHAH2 00000014 502401 10065698

01 FC:1501 1400.00 DA
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Patricia DiGregorio (Depositor's name)
Patricia DiGregorio (Signature)
January 17, 2006 (Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10065698 | 11/11/2002 | Ruth W. Hood JR. | 123921 | 2345 |

TITLE OF INVENTION: METHOD AND APPARATUS FOR AUTOMATIC NON-INVASIVE BLOOD PRESSURE MONITORING

| APPN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 01/20/2006 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-----------------------|----------|----------------|
| NATNITHATHADIA, NAVIN | 3736 | 600-490000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.331).

☐ Change of correspondence address (or Change of Correspondence Address from PTO/SI/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SI/17 Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. CANTOR COLBURN LLP

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

GE Medical Systems Global
 Technology Company, LLC

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Waukesha, Wisconsin

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(p)(2).

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Date January 17, 2006Typed or printed name Philmore H. Colburn IIRegistration No. 35,101

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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